

MISSOURI PRESCHOOL PROJECT

Accreditation

The accreditation process provides access to standards that serve as guidelines associated with quality programs. Programs that achieve accreditation demonstrate a commitment to providing high quality services for young children and families.

Select at least one Accrediting Source:

☐ Missouri Accreditation

☐ NAEYC Accreditation

Include:

- **If the program is accredited, a copy of the current accreditation certificate must be on file.**
- **If the program is not accredited, documentation as outlined in the Program Guidelines that indicates the progress of accreditation must be on file as follows:**

Year 1:

- Acquire Self-Study Materials
- Review Self-Study Materials
- Conduct Preliminary Internal Review of program
- Inform parents of intent to pursue Accreditation
- Develop classroom and program goals from results of Preliminary Internal Review
- Send DESE the following information:
 - how and when parents were notified
 - results of Preliminary Internal Review
 - goals developed

Year 2:

- Review goals
- Continue to communicate with parents about the accreditation process
- Implementation of improvements/changes
- Send DESE a copy of the Implementation Plan

Year 3:

- Complete Self-Study materials
- Submit Notification of Intent (for NAEYC Accreditation)
- Submit Self-Study materials
- Send DESE a copy of the Accreditation Certificate

Year 4 or more:

- Send DESE a copy of the programs current Accreditation Certificate

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Application

An Approved Application is an application that has been approved by your DESE Supervisor.

Include:

- **A copy of the MPP Application your program submitted.**

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Approved Budget

An Approved Budget is the budget that has been approved by your DESE Supervisor.

Include:

- **A copy of the approved MPP budget.**
- **A copy of all amendments to the budget.**

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Daily Schedule

Include:

- **A copy of the daily schedule for each MPP classroom.**

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Enrollment/Attendance

Include:

- **Class list with attendance.**
- **Enrollment record for each child enrolled in a MPP classroom. You may use the enrollment form provided by DHSS. Enrollment records may be filed on site but must be readily available for review.**

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Class List

Complete a class list for each MPP classroom.

Teacher _____ Location _____

Teacher Assistant _____ School Year _____

Name	Student ID No. (Assigned by district/program)	Birthday (Must be age 3 or 4 before August 1 st)	Entrance Date	Exit Date	No. Of Months Attended	Program-Full Day (All MPP Children must attend a full day program)	Parental Fee
1.	MPP-						
2.	MPP-						
3.	MPP-						
4.	MPP-						
5.	MPP-						
6.	MPP-						
7.	MPP-						
8.	MPP-						
9.	MPP-						
10.	MPP-						
11.	MPP-						
12.	MPP-						
13.	MPP-						
14.	MPP-						
15.	MPP-						
16.	MPP-						
17.	MPP-						
18.	MPP-						
19.	MPP-						
20.	MPP-						

Make copies as needed.

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Enrollment Record

Child's Name	Student ID #	Social Security # (Optional)

Date of Enrollment	Date of Exit	Reason for Exit

Parent Name	Parent Home Phone Number	Parent Work Phone Number

Home Address	Work Address
Street	
City	
Zip Code	

Parent Name	Parent Home Phone Number	Parent Work Phone Number

Home Address	Work Address
Street	
City	
Zip Code	

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Final Reports

Include:

- **A completed copy of the Completion Report.**

Reminder: This report is due by May 15th.

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Guidelines

The Missouri Preschool Project Guidelines are updated each year and can be downloaded at:

http://dese.mo.gov/divimprove/fedprog/earlychild/Preschool_Project_Index.htm

Include:

- **A copy of the Missouri Preschool Project Guidelines**

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Inventory

Include:

- **A copy of the inventory list.**

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Inventory

List only equipment over \$1000.

[illegible]

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Other

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Parent Advisory Committee

Include:

- **Parent Advisory Committee (PAC) Membership List;**
- **Advisory Committee Agenda**
- **Minutes of meeting(s) including date(s) of meeting(s); and**
- **Sign-up sheet(s) of those who attended each PAC meeting.**

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Parent Advisory Committee Membership List

(Copy page as needed)

PARENT’S NAME	CHILD’S NAME IN THE MPP CLASS

Note: In addition to the above information, program records should include dates, an agenda, minutes, and a sign-up sheet of those who attended each Parent Advisory Committee meeting.

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Parent Education/Involvement

Include:

Documentation of all parent education activities such as the following:

- **Parent Education/Involvement Summary**
- **Personal Visit Schedule**
- **Personal Visit Report**
- **Parent/Teacher Conference Schedule**
- **Parent Group Meeting Schedule includes dates, minutes, and sign-up sheets.**
- **Copy of newsletters**
- **Volunteer Activities**
- **Other**

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Parent Education

Choose those activities that apply to your program.

A. Personal Visits

Yes or No	Visits Provided By	No. of Visits	No. of Families
	Parents as Teachers		
	MPP Teachers		

B. Parent Education Activities-

Yes or No	Activities	No. Provided
	Parent/Teacher Conferences	
	Parent and Child Activities	
	Parent Group Meetings	
	Newsletters	
	Other: Explain Below	

Other:

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Parent Education/Involvement Summary

Complete a class list for each MPP classroom.

Teacher _____ Location _____

Teacher Assistant _____ School Year _____

Child's Name	Student ID No.	Personal Visits Number Attended	Parent/Teacher Conferences Number Attended	Group Meetings Number Attended	Volunteer Activities Number Attended	Parent & Child Activities Number Attended
	MPP-					
	MPP-					
	MPP-					
	MPP-					
	MPP-					
	MPP-					
	MPP-					
	MPP-					
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	MPP-					

Make copies as needed.

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Parental Fee Schedule

Include:

- **A copy of the parental fee schedule**
- **A copy of the sliding scale fee schedule for low-income families**

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Payments/Invoices

Include:

- **A copy of all invoices submitted to DESE for reimbursement. All school districts and private providers who have been approved for MPP funds must submit an invoice. DESE will provide a sample invoice form to all programs.**

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Professional Development

Include:

Documentation of professional development provided by MPP funds for teachers and teacher assistants such as:

- **Curriculum Training-**
 1. **Certificate of Completion**
 2. **Letter from training source verifying attendance**
- **College Credit- Through T.E.A.C.H. Early Childhood® Missouri**
 1. **Transcript**
- **Conference-**
 1. **Certificate of Attendance**

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Professional Development

Complete one for each teacher/teacher assistant in classrooms supported by MPP funds.

Name of Staff	Position

Research-Based Curriculum Training	Date of Attendance	Completed Date

College Courses	Date of Attendance	Completed Date

Other Professional Development Activities (including college courses, conferences)	Date of Attendance	Completed Date

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Program Evaluation

Include:

- **MPP Review Checklist***
- **MPP Self-Monitoring Report***
- **Local program evaluation**
 1. **Rate of Staff Participation in Professional Development**
 2. **Rate of Parents Participation in Parent Education/Involvement Activities**
- **Mo-T On-site Consultation Reports (Initial Visit & Subsequent Visits)**
- **Parent Questionnaire**

* Samples attached

**MISSOURI PRESCHOOL PROJECT (MPP)
REVIEW CHECKLIST**

District _____ **District Code** _____

Location of Program _____ **Number of Children** _____

Date(s) of Review _____ **Reviewed By** _____

Contact Person: _____

FC PC NC*

____ ____ ____ 1. **Supervision:** A designated contact person can describe current project and approved application.

____ ____ ____ 2. **Accreditation:** Annual progress to achieving Accreditation is documented.

☐ Missouri Accreditation
or

☐ NAEYC Accreditation

____ ____ ____ 3. **Approved Budget:** A listing or system exists to account for the expenditure of funds. Funds must be expended according to the approved budget.

☐ dated list of expenditures

☐ spreadsheet of expenditures including dates

☐ itemized list

____ ____ ____ 4. **Daily Schedule:** Must be developmentally appropriate and reflect the selected curriculum.

____ ____ ____ 5. **Enrollment/Attendance:**

☐ Class List

☐ Enrollment Record

☐ Daily Attendance Sheets

____ ____ ____ 6. **Final Report:** A copy of the Final Report is on file, along with any amendments made to the final report.

☐ Final Report

___ ___ ___ 7. **Inventory:** All equipment over \$1,000 purchased with the MPP grant must be listed on an inventory form and is readily available for review.

___ ___ ___ 8. **Materials and Supplies:** Adequate material and supplies to implement the selected curriculum is available.

___ ___ ___ 9. **Parent Advisory Committee:** Documentation is on file that includes a list of members, dates of meetings, an agenda and minutes of meetings. Committee must include parents of children in the MPP program.

- ☐ PAC Membership List
- ☐ Agenda including dates
- ☐ Sign up sheets
- ☐ Minutes

___ ___ ___ 10. **Parent Education/Involvement:**

- ☐ Parent Education
- ☐ Parent Education Summary

___ ___ ___ 11. **Parental Fee Schedule:** A parental fee schedule is on file that includes a sliding fee scale for low income families.

- ☐ Parent Fee Schedule
- ☐ Sliding Scale Fee Schedule

___ ___ ___ 12. **Payment/Invoices:** A copy of all invoice forms submitted to DESE for payment of MPP funds must be on file.

- ☐ Payment Request Forms

___ ___ ___ 13. **Professional Development:** A copy of the certificate of attendance, an invoice or a financial statement for all professional development is on file.

- ☐ Curriculum Training
- ☐ Observational Assessment
- ☐ MoT Regional Training
- ☐ T.E.A.C.H
- ☐ DESE approved conferences

___ ___ ___ 14. **Program Evaluation:** The program is evaluated and documentation is on file for the MPP review checklist, MPP Self Monitoring Report, and local program evaluations.

- | | |
|---|--|
| <input type="checkbox"/> Self Monitoring Report | <input type="checkbox"/> ECERS |
| <input type="checkbox"/> MoT Technical Assistance Reports | <input type="checkbox"/> Teacher Evaluations |

___ ___ ___ 15. **State Licensure:** MPP program is licensed or has an application on file with the DHSS

____ 16. **Student Evaluation:**

- ☐ Portfolio's
- ☐ Observational Assessment
- ☐ Other

____ 17. **Teacher and Teacher Assistant Qualifications:** Teacher(s) and teacher assistant(s) must meet qualifications.

____ 18. **10% Requirement:** Activities for community licensed preschool programs are according to the approved application and documentation are on file.

- ☐ agendas for activities
- ☐ sign-in sheets of participants

Comments:

FC-Full Compliance; PC-Partial Compliance; NC-Noncompliance



MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION
DIVISION OF SCHOOL IMPROVEMENT – EARLY CHILDHOOD PROGRAMS
SELF-MONITORING REPORT – MISSOURI PRESCHOOL PROJECT (MPP)

Lead Agency:

County-District Code:

Contact Person:

Form Due Date:

SEPTEMBER 15

Directions

1. Respond to each of the following monitoring requirements by placing an appropriate code (*see below*) on the line to the left of the corresponding item. **Responses are required on each lettered item**, and documentation proving compliance must be kept on file at the agency.

CODE KEY

DC = District/Program Compliant: An internal review indicates compliance. When using this code, the district must have the documentation readily available for review by the Early Childhood Section staff, if requested.

DR = District/Program Resolving: An internal review indicates a compliance discrepancy. When using this code, use the comment section to explain how the district intends to resolve the discrepancy and its intended time frame for completion.

DA = District/Program Assistance: The district requests assistance. A supervisor from the Early Childhood Section will contact the district to arrange for assistance.

NA = Not Applicable to this district/program.

2. Place a checkmark in all appropriate boxes under Evidence Sources to indicate the type of supporting documentation you have available. The documentation of evidence sources must be on file at the agency for possible review. Do not send copies of evidence sources to Early Childhood Section.
3. MAIL the completed form by the due date above to: Coordinator, Federal Programs, Missouri Department of Elementary and Secondary Education, PO Box 480, Jefferson City, MO 65102
4. QUESTIONS: Contact: Early Childhood Section, (573) 751-2095

Assurances

The authorized representative assures the Department of Elementary and Secondary Education that the district/program shall:

1. Receive and expend state funds in a manner consistent with the intent of the program.
2. Keep such records for a period of three years and provide such information as may be necessary for the fiscal program auditing and for program evaluation; provide the Department of Elementary and Secondary Education any information it may need to carry out its responsibilities under the programs.
3. Adhere to the requirements of the applicable state legislation and rules governing the program, and all other applicable statutes.

The authorized representative understands the assurances and the responsibility for compliance placed upon the district/program and will make every attempt to ensure that the Missouri Preschool Project program is implemented in a way that is consistent with the authorizing legislation.

Authorized Representative

Date

KEY:**DC = District/Program Compliant****DR = District/Program Resolving****DA = District/Program Assistance****NA = Not Applicable to this district/program****General Provisions**

____ **1. Supervision:** A designated contact person can describe current project and approved application.

Evidence Sources:

- ☐ copy of the approved application

____ **2. Accreditation:** Annual progress to achieving Accreditation is documented.

Evidence Sources:

- ☐ Missouri Accreditation
(or)
☐ NAEYC Accreditation

____ **3. Approved Budget:** Appropriate records of expenditures are available.

Evidence Sources:

- ☐ dated lists of expenditures
☐ spreadsheet of expenditures including dates
☐ itemized list

____ **4. Daily Schedule:** Must be developmentally appropriate and reflect the selected curriculum. Must be a minimum of three hours for half-day programs but no more than 6.5 hours daily for full-day programs.

Evidence Sources:

- ☐ 5 day-a-week program
☐ 4 day-a-week program (only programs awarded in FY00)

____ **5. Enrollment/Attendance:**

Evidence Sources:

- ☐ class list
☐ enrollment records
☐ daily attendance sheets

____ **6. Final Report:** A copy of the final report is on file, along with any amendments made to the final report.

Evidence Sources:

- ☐ Final Report

____ **7. Inventory:** An accurate inventory is available.

Evidence Sources:

- ☐ inventory list of all equipment over \$1,000

____ **8. Material and Supplies:** Adequate material and supplies to implement the selected curriculum is available.

____ **9. Parent Advisory Committee:** Appropriate documentation of activities is available.

Evidence Sources:

- ☐ PAC membership list
☐ dated agendas
☐ sign-up sheets
☐ dated minutes of meetings

KEY:**DC = District/Program Compliant****DR = District/Program Resolving****DA = District/Program Assistance****NA = Not Applicable to this district/program****General Provisions****____ 10. Parent Education/Involvement:****Evidence Sources:**

- ☐ Parent Education
- ☐ Parent Education Summary

____ 11. Parental Fee Schedule: A parental fee schedule is on file that includes a sliding fee scale for low income families.**Evidence Sources:**

- ☐ parent fees schedule
- ☐ sliding scale fee schedule

____ 12. Payment/Invoices: A copy of all invoice forms submitted to DESE for payment of MPP funds should be on file.**Evidence Sources:**

- ☐ Payment Request Forms

____ 13. Professional Development: A copy of the certificate of attendance, invoice or financial statement for all professional development is on file.**Evidence Sources:**

- ☐ curriculum training
- ☐ Observational Assessment
- ☐ DESE approved conferences
- ☐ MoT Regional Training
- ☐ T.E.A.C.H.

____ 14. Program Evaluation: The program is evaluated and documentation is on file for the MPP review checklist, MPP self monitoring report, and local program evaluations.**Evidence Sources:**

- ☐ Self-Monitoring Report
- ☐ MoT Technical Assistance Reports
- ☐ ECERS
- ☐ Teacher Evaluations

____ 15. State Licensure: MPP program is licensed and a copy of the certificate is posted in the classroom.**____ 16. Student Evaluation:****Evidence Sources:**

- ☐ portfolio's
- ☐ Observational Assessment
- ☐ other

____ 17. Teacher Qualifications: Teacher(s) and teacher assistant(s) meet MPP qualifications.**Evidence Sources:**

- ☐ copies of certification
(or)
- ☐ copies of transcripts

____ 18. 10% Requirement: Professional Development activities for community licensed preschool programs have been provided.**Evidence Sources:**

- ☐ agendas for activities
- ☐ sign-in sheets of participants

Comments for items indicated DR – Please include plan and time frame for resolution

MISSOURI PRESCHOOL PROJECT

State Licensure

(From the Missouri Department of Health and Senior Services,
Bureau of Child Care)

Include:

- **A copy of the Application for Licensing.**
- **A copy of the current license.**

Important Note: All contractors, governmental, public school districts and private agencies, should be in operation, with children in attendance, by October 3, 2005 but must be in operation with children in attendance no later than December 15, 2005 as either a Group Child Care Home or a Child Care Center. There will be NO extensions.

MISSOURI PRESCHOOL PROJECT

Student Evaluation

Include:

Documentation on how students are evaluated for progress such as:

- **Portfolios**
- **Observational Checklist**
- **Work Sampling**
- **Child Observation Record (COR)**
- **Project Construct Assessment**
- **Others (Please include description)**

Note: Student evaluation will be on file for each child and available for review by DESE.

MISSOURI PRESCHOOL PROJECT

Teacher/Teacher Assistant Qualifications

Include:

Documentation of qualifications for each teacher or teacher assistant such as:

LEAD TEACHER	TEACHER ASSISTANT
Early Childhood Teacher Certificate = EC	High School Vocational Certificate in Early Childhood Care and Education <u>and</u> High School Diploma = HSV
Early Childhood Special Education Teacher Certificate = ECSE	Child Development Associate and pass the ParaPro Assessment = CDA Certificate
A payment exception will be granted for individuals holding a 4-year college degree in Child Development = 4CD (Transcript)	One-Year Certificate of Proficiency in Child Development or Child Care= PCD
	Two-Year Associate Degree in Child Care/Education = ACC (Certificate)
	Sixty College Hours and Experience Working in a Program with Young Children and Their Families = 60 HRS (Transcript)

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10% Community Set Aside

Include:

- **Complete forms on 10% Community Set Aside**

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10% Community Set Aside

The program received a waiver. This section does not need to be completed.

Complete only those sections that are applicable to your program.

Section A. Accreditation Assistance (MoA or NAEYC)

Name of Program	Accreditation

Section B. Funding Match for T.E.A.C.H. Early Childhood

[illegible]

Section C. Research-Based Curriculum Training

Name of Program	Name of Staff Trained	Curriculum Model	Training Dates

Section D. Early Childhood Conferences Approved by DESE

Name of Program	Name of Staff Trained	Name of Activity

Make copies as needed.